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FILE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (8) 130.00 Atomey Docket No. 0951-0178PUS1 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):						Complete if Known						
FOF FY 2009 First Named Inventor Renicht MORIMOTO						Application Num	nber	10/562,145-Cc				
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METHOD OF PAYMENT (check all that apply) Check	Applicant claims small entity status. See 37 CFR 1.27					Art Unit	2854	54				
Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number O2-2448 Deposit Account Name Birch, Stewart, Kolasch & Birch, LLP	TOTAL AMOUNT OF PAYMENT (\$) 130.00					Attorney Docket No. 0951-0178PUS1						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) under 37 CFR 1.16 and 1.17 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) under 37 CFR 1.16 and 1.17 EECALCULATION Land 1.17 BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (s)	METHOD OF PAYMENT (check all that apply)											
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims 12 - 20 or HP 0 x = Fee (\$) Fee Paid (\$) Multiple Dependent Claims 12 - 20 or HP 0 x = Fee (\$) Fee Paid (\$) Multiple Dependent Claims 12 - 20 or HP 0 x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) By Pee Paid (\$) 13 -8 or HP = 0 x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x = Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month Registration No. (Altomey/Agent) 39,491 Telephone (703) 205-8000	Reissue	3	30	165	540	270	650	325				
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(Attorney/Agent) 39,491 Telephone (703) 203-8000	SUBMITTED BY			7								
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